

WEST BANK/ GAZA
PILOT HEALTH PROJECT

ASSESSMENT OF STANDARDS OF
HEALTH CARE SERVICES

Consultants:

- Prof. Dr. Nabil Younis
- Dr. Nevine Hassanein
- Dr. Nagah Manasrah

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Executive Summary

BACKGROUND

The goal of the Pilot Health Project (PHP) is to improve the health status of Palestinian mothers and their children. To do so, the quality of antenatal and postpartum services for mothers and their children will be upgraded in the PHP sites.

The PHP builds upon partner NGO efforts already on ground, improving and strengthening these efforts and backing them with appropriate systems and mechanisms. This includes among other activities, training of staff that matches education and service needs and developing new curricula for training of health service providers.

The Center for Development in Primary Health Care (CDPHC) is one of the two major Population Council's partners that is responsible for providing the training needed for service providers. This center works in collaboration with Al-Quds University for upgrading quality of health services through provision of competency based training programs to health personnel.

Objectives of the Consultancy

- To assess the quality of antenatal/postpartum care provided by different categories of health providers [Physicians, Nurses, Health workers, Managers and Outreach Workers], in the PHP clinics.
- To identify the gap between existing and expected performance as well as decide upon the training needs of each category of health providers to achieve the targeted standards of care within the planned PHP activities.

This assessment has been done in close coordination with PHP partners (MOH, Care International, and partner NGO's). In addition, consultants also met with UNFPA advisors who are undertaking similar assessment for MOH clinics to ensure that the two procedures are consistent with each other and ensure coordination of efforts.

This consultancy was undertaken during the period July 10- August 31, 1999.

Team Composition

The team of consultants assigned for the assessment included:

From Egypt

- 1- Prof. Dr. Nabil Younis, Senior Ob/Gyn Specialist and Professor at Al Azhar University, Cairo, Egypt
- 2- Dr. Nevine Hassanein, Ob/Gyn Specialist and part time Consultant to John Snow Int. (JSI).

From West Bank(CDPHC)

- 3- Dr. Nagah Manasrah, Consultant

Workplan

A-Preparatory Phase (10 days)

During this phase, the first two members worked together in Cairo to develop an overall plan for the implementation of the consultancy. Tools and instruments used for the assessment process were developed and tested with regards to the international guidelines and standards (WHO), which included nine (9) forms:

- 1- Physician observation: Antenatal Care
- 2- Physician observation: Postpartum Care
- 3- Physician Quiz (30 Multiple Choice Questions)
 - 4- Nurses observation
 - 5- Nurses interview
 - 6- Nurses Quiz (18 questions)
 - 7- Manager interview
- 8- Client Antenatal/Postpartum Exit interview
- 9- Client Postpartum Home interview

The national consultant made necessary contacts with each partner NGO to organize the schedule of visiting clinics, keeping in mind the facility working hours and the geographical and organizational representation.

Contacts were also made with major partners; including MOH, Care International to coordinate planning meetings, review available data and protocols developed.

B- Information collection phase (two weeks)

During this phase only the second member in the team traveled to WB/ Gaza to do the assessment in the field. She worked closely with the national consultant and other collaborators cited above to:

- 1- Assess the service providers' knowledge and skill competency by category (through interviews/ others).
- 2- Identify current standards of care.
- 3- Explore the type of information given to women during clinic antenatal visits and postpartum home visits (through some exit interviews, observations and home interviews).
- 4- Assess availability of outreach services and role of outreach workers, information given, frequency and timing of visits to each woman and number of cases allocated to each worker as well as systems in place for supervision and evaluation.
- 5- Identify the training and field experience of providers by type.

During this phase the national consultant worked closely with the second member in the team as needed. She also assisted in organizing field activities including scheduling meetings and interviews with partner NGOs, as well as, other partners as needed.

C- Analytic phase (10 days).

During this phase, the first two members of the team worked together in Cairo to analyze data/ information collected to propose the gap in health providers' technical knowledge and clinical skills that need to be covered through training for each category.

Findings

The total number of clinics included in the PHP were 27:

- ❖ 22 in West Bank [2 in Hebron & 20 in Jenin]
- ❖ 5 in Gaza

From this total number 15 were visited.

- ❖ 11 in West Bank [2 in Hebron and 9 in Jenin]
the rest of the Jenin clinics were not providing the service during the implementation period of the assessment because they followed physician rotational schedule
- ❖ 4 in Gaza (the one left was at Rafah not providing the service)

PHYSICIANS

The total number of Physicians covered in the assessment were 10:

- ❖ 6 physicians in the West bank
(2 in Hebron rotating between the 2 Hebron clinics)
(4 in Jenin - 2 of them formed a mobile team that covers 14 clinics/week under the PFS medical coverage.
- 2 were assigned to rotate between 5 clinics/week under the UPMRC medical coverage.
- ❖ 4 physicians in Gaza (1 physician in each clinic)

From physician's Questionnaire, physician's knowledge were found to be inadequate (scoring <75%), in the following:

- Antenatal care
- Pre-eclampsia/eclampsia
- Diabetes in pregnancy
- Infection control

From observation of physician's performance while providing antenatal/postpartum care in the clinics, it was found that they lack the following skills:

- Communication skills
- Infection control practices
- History taking skill
- Basic steps in physical examination
- Health education skills
- Identifying high risk cases

Physicians didn't have standard protocols to use or to follow in antenatal and postpartum care.

NURSES/HEALTH WORKERS

The total number of Nurses/Health Workers seen was 13:

- ❖ 6 nurses (2 in Jenin and 4 in Gaza)
 - ❖ 7 Health workers (2 in Hebron and 5 in Jenin)
- [These are women who received 9 months of social education and health training to provide basic nursing related services to bridge the gap of assisting health needs in remote areas]

Using the knowledge assessment instrument, the following information were found to be inadequate:

- Infection control
- Nurses duties in provision of antenatal/postpartum care

After interviewing some of the nurses/health workers and observing some of them while providing client/physician assistance in the examination room, it was found they were lacking the following:

- Communication skills
- Counseling skills
- Infection control practice
- Basic nursing skills in preparing the examination and instrument table
 - Breast-feeding knowledge and educational skills
 - Technical and health educational training

MANAGERS

The total number of Managers interviewed were 6, as some of the clinics didn't have an assigned clinic manager:

- ❖ 4 in West bank (2 in Hebron was a General Practitioner)
(1 in Jenin was Ob/Gyn physician)
(1 in Jenin was Administrative Director)
- ❖ 2 in Gaza (1 was General Practitioner)
(1 was Administrative Director)

Physicians were providing medical and managerial services in the clinic. None of them received any managerial training. They didn't have a referral system to follow when referring cases to higher level facilities. Most of them had schedules to follow for educational activities as well as educational materials that were only lacking in flipcharts and videotapes.

OUTREACH SERVICES

Antenatal outreach services were not provided in the area of the West Bank or in Gaza. Postpartum outreach services were found to be symbolic as this activity is provided by social health workers who cannot provide medical services. The total number of postpartum home interviews for clients was 6, all in the West Bank area, as postpartum outreach services were not yet established in Gaza. Some of the clinics had outreach schedule to follow, but supervision and evaluation of this activity were not carried out as supposed to be.

CLIENT INTERVIEWS

The total number of exit interview were 11, as no clients were available in some of the clinics that were visited during the implementation of the assessment:

- ❖ 7 in West Bank (in Hebron and 6 in Jenin)
- ❖ 4 in Gaza

Clients were satisfied from the service provided in the clinics despite the inadequacy met during the assessment. The friendly attitude of health providers, the cleanliness of the clinics and the reasonable cost of the service, were appreciated by all clients.

While privacy during examination, was lacking in most of the clinics.

Recommendations

Training programs should be planned in order to improve the quality of antenatal and postpartum care as well as to ensure the competency of different categories of health providers, through:

- Developing standard protocols
- Training workshops (On job training)
- Improving management and referral systems
 - Promoting outreach service activities
- Establishing an adequate system of supervision